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PATENT

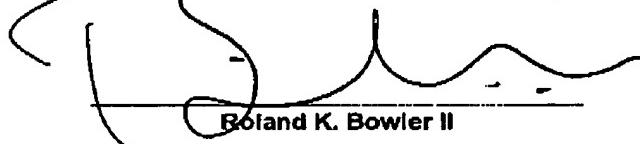
IN THE UNITED STATES PATENT & TRADEMARK OFFICE

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**Certificate of Facsimile Under 37 CFR 1.8**

I hereby certify that this correspondence is being transmitted via facsimile to 571-273-8300 on 23 MARCH 2006 addressed to: ASSISTANT COMMISSIONER FOR PATENTS, ALEXANDRIA, VA 22313.



Roland K. Bowler II

|              |  |   |                            |
|--------------|--|---|----------------------------|
| Applicant:   | KUCHIBHOTLA  | ) |                            |
| Appl. No.    | 10/680,522   | ) | Examiner C. Appiah         |
| Confirm. No. | 505  | ) | Art Unit 2686              |
| Filed:       | 7 October 2003   | ) | Atty. Docket No. CS23738RL |
| Title:       | "Wireless Radio Network Resource Sharing<br>Among Core Networks And Methods" |   |                            |

**TRANSMITTAL UNDER 37 CFR 1.111**

Assistant Commissioner for Patents  
Alexandria, Virginia 22313

Sir:

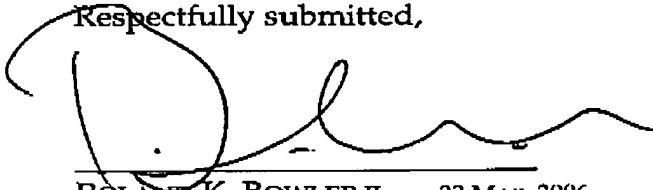
KUCHIBHOTLA ET AL.  
"Wireless Radio Network Resource Sharing  
Among Core Networks And Methods"  
Atty. Docket No. CS23738RL

Appl. No. 10/680,522  
Confirm. No. 5055  
Examiner C. Appiah  
Art Unit 2686

The following is enclosed in response to the non-final Office  
Action of 13 March 2006:

- [ X ] Response under 37 CFR 1.111 (14 pages);  
[ X ] Fee Calculation Sheet (NO FEE DUE).

Respectfully submitted,

  
ROLAND K. BOWLER II 23 MAR. 2006  
REG. NO. 33,477

TELEPHONE NO. (847) 523-3978  
FACSIMILE NO. (847) 523-2350

MOTOROLA, INC.  
INTELLECTUAL PROPERTY DEPT. (RKB)  
600 NORTH U.S. HIGHWAY 45, AN475  
LIBERTYVILLE, ILLINOIS 60048

| <b>FEE TRANSMITTAL</b><br><small>Patent fees are subject to annual revision</small>   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
|---|----------------|--|--|--|------------------|-----------------------|--------------|--|---------------|---------------------------|------------------|--------------|----------------|------------------------------|----------------|-----------------------|----------------|---|---------|-----|------|-----|-------------------------------------|---------------|--------------|----------|---------------|---------------------------|------|-------------|-------|------|---|------|------|------|------|--|------|---------|------|-------|---|------|-----|------|-------------|--|------|-----|------|-----|---|------|------|------|-----|--|------|------|------|-----|---|------|------|------|------|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|------|------|-----|--------------------------|------|------|------|------|---|------|-----|------|-----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|------|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|-----------------------------------|------|-----|------|-----|---|
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>TOTAL AMOUNT OF PAYMENT (\$)</b> <b>0.00</b>   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>METHOD OF PAYMENT (check all that apply)</b>   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Check   | Credit card    | Money Order                                      | Other  | None   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number <b>502117</b><br>Deposit Account Name <b>MOTOROLA INC.</b><br><br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>FEE CALCULATION</b>  |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> </tr> <tr> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>   |                |  |  |  |                  | Application Type      | FILING FEES  |  | SEARCH FEES   |                           | EXAMINATION FEES |              | Large Fee (\$) | Small Entity Fee (\$)        | Large Fee (\$) | Small Entity Fee (\$) | Large Fee (\$) | Small Entity Fee (\$)   | Utility | 300 | 150  | 500 | 250                                 | 200           | 100          | Design   | 200           | 100                       | 100  | 50          | 130   | 65   | Plant   | 200  | 100  | 300  | 150  | 160  | 80   | Reissue | 300  | 150   | 500   | 250  | 600 | 300  | Provisional | 200                                    | 100  | 0   | 0    | 0   | 0                                       |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Application Type  | FILING FEES    |  | SEARCH FEES  |  | EXAMINATION FEES |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
|   | Large Fee (\$) | Small Entity Fee (\$)                            | Large Fee (\$)   | Small Entity Fee (\$)  | Large Fee (\$)   | Small Entity Fee (\$) |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Utility   | 300            | 150  | 500  | 250  | 200              | 100                   |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Design  | 200            | 100  | 100  | 50   | 130              | 65                    |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Plant   | 200            | 100  | 300  | 150  | 160              | 80                    |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Reissue   | 300            | 150  | 500  | 250  | 600              | 300                   |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Provisional   | 200            | 100  | 0  | 0  | 0                | 0                     |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>2. EXTRA CLAIM FEES</b><br>Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent <b>50</b> <b>25</b><br>Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent <b>200</b> <b>100</b><br>Multiple Dependent Claims <b>360</b> <b>180</b>  |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td colspan="2">Multiple Dependent Claims</td> </tr> <tr> <td>- 20 or HP =</td> <td>x 50</td> <td>=</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td></td> </tr> <tr> <td colspan="6">HP = highest number of total claims paid for, if greater than 3</td> </tr> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td colspan="2"></td> </tr> <tr> <td>- 3 or HP =</td> <td>x 200</td> <td>=</td> <td colspan="3"></td> </tr> </table>  |                |  |  |  |                  | Total Claims          | Extra Claims | Fee (\$)   | Fee Paid (\$) | Multiple Dependent Claims |                  | - 20 or HP = | x 50           | =                            | Fee (\$)       | Fee Paid (\$)         |                | HP = highest number of total claims paid for, if greater than 3 |         |     |      |     |                                     | Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |                           |      | - 3 or HP = | x 200 | =    |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Total Claims  | Extra Claims   | Fee (\$)   | Fee Paid (\$)  | Multiple Dependent Claims  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| - 20 or HP =  | x 50           | =  | Fee (\$)   | Fee Paid (\$)  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| HP = highest number of total claims paid for, if greater than 3   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Indep. Claims   | Extra Claims   | Fee (\$)   | Fee Paid (\$)  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| - 3 or HP =   | x 200          | =  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>3. APPLICATION SIZE FEE</b><br>If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity).<br>For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(e).   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Total Sheets:</td> <td>Extra Sheets</td> <td>Number of each additional 50 or fraction thereof</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td></td> </tr> <tr> <td>- 100 -</td> <td>/50 =</td> <td>(round up to a whole number)</td> <td>X 250</td> <td>=</td> <td>Fee Paid (\$)</td> </tr> </table>  |                |  |  |  |                  | Total Sheets:         | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)      | Fee Paid (\$)             |                  | - 100 -      | /50 =          | (round up to a whole number) | X 250          | =                     | Fee Paid (\$)  |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Total Sheets:   | Extra Sheets   | Number of each additional 50 or fraction thereof | Fee (\$)   | Fee Paid (\$)  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| - 100 -   | /50 =          | (round up to a whole number)                     | X 250  | =  | Fee Paid (\$)    |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>4. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="2">Fee Description</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee (\$)</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late Provisional filing</td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> </tr> <tr> <td>1812</td> <td>2520</td> <td>1812</td> <td>2520</td> <td>For filing a request for ex parte Reexamination</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1840*</td> <td>1805</td> <td>1840*</td> <td>Requesting publication of SIR after Examiner action</td> </tr> <tr> <td>1251</td> <td>120</td> <td>2251</td> <td>60</td> <td>Extension for reply within first month</td> </tr> <tr> <td>1252</td> <td>450</td> <td>2252</td> <td>225</td> <td>Extension for reply within second month</td> </tr> <tr> <td>1253</td> <td>1020</td> <td>2253</td> <td>510</td> <td>Extension for reply within third month</td> </tr> <tr> <td>1254</td> <td>1590</td> <td>2254</td> <td>795</td> <td>Extension for reply within fourth month</td> </tr> <tr> <td>1255</td> <td>2100</td> <td>2255</td> <td>1080</td> <td>Extension for reply within fifth month</td> </tr> <tr> <td>1401</td> <td>500</td> <td>2401</td> <td>250</td> <td>Notice of Appeal</td> </tr> <tr> <td>1402</td> <td>500</td> <td>2402</td> <td>250</td> <td>Filing a brief in support of an appeal</td> </tr> <tr> <td>1403</td> <td>1000</td> <td>2403</td> <td>500</td> <td>Request for oral hearing</td> </tr> <tr> <td>1451</td> <td>1510</td> <td>1451</td> <td>1510</td> <td>Petition to institute a public use proceeding</td> </tr> <tr> <td>1452</td> <td>500</td> <td>2452</td> <td>250</td> <td>Petition to revive - unavoidable</td> </tr> <tr> <td>1453</td> <td>1500</td> <td>2453</td> <td>750</td> <td>Petition to revive - unintentional</td> </tr> <tr> <td>1501</td> <td>1400</td> <td>2501</td> <td>700</td> <td>Utility issue fee (or release)</td> </tr> <tr> <td>1502</td> <td>800</td> <td>2502</td> <td>400</td> <td>Design issue fee</td> </tr> <tr> <td>1503</td> <td>1100</td> <td>2503</td> <td>550</td> <td>Plant issue fee</td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Processing fee under 37 CFR 1.17(d)</td> </tr> <tr> <td>1808</td> <td>180</td> <td>1808</td> <td>180</td> <td>Submission of IDS</td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> </tr> <tr> <td>1809</td> <td>790</td> <td>2809</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR § 1.129(g))</td> </tr> <tr> <td>1810</td> <td>790</td> <td>2810</td> <td>395</td> <td>For each additional invention to be examined (37 CFR § 1.129(l))</td> </tr> <tr> <td>1801</td> <td>790</td> <td>2801</td> <td>395</td> <td>Request for Continued Examination</td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> </tr> </tbody> </table> |                |  |  |  |                  | Large Entity          | Small Entity | Fee Description                                  |               | Fee Code (\$)             | Fee Code (\$)    | Fee (\$)     | Fee (\$)       | 1051                         | 130            | 2051                  | 65             | Surcharge - late filing fee or oath                             | 1052    | 50  | 2052 | 25  | Surcharge - late Provisional filing | 1053          | 130          | 1053     | 130           | Non-English specification | 1812 | 2520        | 1812  | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | 1805 | 1840*   | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251 | 120 | 2251 | 60          | Extension for reply within first month | 1252 | 450 | 2252 | 225 | Extension for reply within second month | 1253 | 1020 | 2253 | 510 | Extension for reply within third month | 1254 | 1590 | 2254 | 795 | Extension for reply within fourth month | 1255 | 2100 | 2255 | 1080 | Extension for reply within fifth month | 1401 | 500 | 2401 | 250 | Notice of Appeal | 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | 1403 | 1000 | 2403 | 500 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 500 | 2452 | 250 | Petition to revive - unavoidable | 1453 | 1500 | 2453 | 750 | Petition to revive - unintentional | 1501 | 1400 | 2501 | 700 | Utility issue fee (or release) | 1502 | 800 | 2502 | 400 | Design issue fee | 1503 | 1100 | 2503 | 550 | Plant issue fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(d) | 1808 | 180 | 1808 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 790 | 2809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(g)) | 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(l)) | 1801 | 790 | 2801 | 395 | Request for Continued Examination | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |
| Large Entity  | Small Entity   | Fee Description                                  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Fee Code (\$)   | Fee Code (\$)  | Fee (\$)   | Fee (\$)   |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1051  | 130            | 2051   | 65   | Surcharge - late filing fee or oath  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1052  | 50             | 2052   | 25   | Surcharge - late Provisional filing  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1053  | 130            | 1053   | 130  | Non-English specification  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1812  | 2520           | 1812   | 2520   | For filing a request for ex parte Reexamination                            |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1804  | 920*           | 1804   | 920*   | Requesting publication of SIR prior to Examiner action                     |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1805  | 1840*          | 1805   | 1840*  | Requesting publication of SIR after Examiner action                        |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1251  | 120            | 2251   | 60   | Extension for reply within first month                                     |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1252  | 450            | 2252   | 225  | Extension for reply within second month                                    |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1253  | 1020           | 2253   | 510  | Extension for reply within third month                                     |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1254  | 1590           | 2254   | 795  | Extension for reply within fourth month                                    |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1255  | 2100           | 2255   | 1080   | Extension for reply within fifth month                                     |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1401  | 500            | 2401   | 250  | Notice of Appeal   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1402  | 500            | 2402   | 250  | Filing a brief in support of an appeal                                     |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1403  | 1000           | 2403   | 500  | Request for oral hearing   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1451  | 1510           | 1451   | 1510   | Petition to institute a public use proceeding                              |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1452  | 500            | 2452   | 250  | Petition to revive - unavoidable   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1453  | 1500           | 2453   | 750  | Petition to revive - unintentional   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1501  | 1400           | 2501   | 700  | Utility issue fee (or release)   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1502  | 800            | 2502   | 400  | Design issue fee   |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1503  | 1100           | 2503   | 550  | Plant issue fee  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1460  | 130            | 1460   | 130  | Petitions to the Commissioner  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1807  | 50             | 1807   | 50   | Processing fee under 37 CFR 1.17(d)  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1808  | 180            | 1808   | 180  | Submission of IDS  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 8021  | 40             | 8021   | 40   | Recording each patent assignment per property (times number of properties) |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1809  | 790            | 2809   | 395  | Filing a submission after final rejection (37 CFR § 1.129(g))              |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1810  | 790            | 2810   | 395  | For each additional invention to be examined (37 CFR § 1.129(l))           |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1801  | 790            | 2801   | 395  | Request for Continued Examination  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1802  | 900            | 1802   | 900  | Request for expedited examination of a design application                  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>5. OTHER FEE(S) (specify)</b><br>Non-English Specification, \$130 fee (no small entity discount)   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Fee Paid (\$)</td> </tr> </table>   |                |  |  |  |                  | Fee Paid (\$)         |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Fee Paid (\$)   |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>SUBMITTED BY</b> <b>ROLAND K. BOWLER II</b>  |                |  |  |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Name (Print/Type) _____   |                |  | Registration No. <b>33,477</b> Telephone <b>847-523-3978</b> |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Signature _____   |                |  | Date <b>23 March 2006</b>                                    |  |                  |                       |              |  |               |                           |                  |              |                |                              |                |                       |                |   |         |     |      |     |                                     |               |              |          |               |                           |      |             |       |      |   |      |      |      |      |  |      |         |      |       |   |      |     |      |             |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |

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PATENT

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

|              |  |   |                            |
|--------------|--|---|----------------------------|
| Applicant:   | KUCHIBHOTLA  | ) | Examiner C. Appiah         |
| Appl. No.    | 10/680,522   | ) | Art Unit 2686              |
| Confirm. No. | 505  | ) | Atty. Docket No. CS23738RL |
| Filed:       | 7 October 2003   | ) |                            |
| Title:       | "Wireless Radio Network Resource Sharing<br>Among Core Networks And Methods" |   |                            |

**PROVISIONAL ELECTION & TRAVERSE IN  
RESPONSE TO RESTRICTION UNDER 35 USC 121**

Assistant Commissioner for Patents  
Alexandria, Virginia 22313

Sir:

Kindly enter the following amendment prior to further examination of the referenced application.

In The Claims: